Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

IN THE DISTRICT COURT FOR THE JUDICIAL DISTRICT

FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF

SMALL CLAIMS DEPARTMENT

|  |  |
| --- | --- |
|   , Plaintiff(s), vs.  , Defendant(s). | Case No. AFFIDAVIT AND MOTION TOCHANGE VENUE |

I, , certify and state:

1. I am the Defendant in this case. I move to have this action transferred to County, pursuant to Idaho Code §1-2301.

2. The Plaintiff filed this action in County. This is the wrong county because:

**CERTIFICATION UNDER PENALTY OF PERJURY**

I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

Date:

Typed/printed name Signature